



2024 COBRA MONTHLY RATES

MEDICAL PLAN	1 Person	Two People	Family
Kaiser 0/5 – Paraprofessionals & Operations Only	\$ 865.98	\$ 1,707.48	\$ 2,406.18
Kaiser 10/10	\$ 833.34	\$ 1,643.22	\$ 2,315.40
UHC VEBA DIRECT 10	\$ 855.78	\$ 1,694.22	\$ 2,378.64
UHC VEBA DIRECT 20	\$ 823.14	\$ 1,628.94	\$ 2,283.78
UHC HMO Network 3 – SEA, Management, OTBS	\$ 895.56	\$ 1,602.42	\$ 2,251.14
UHC PPO - No HRA	\$ 1,828.86	\$ 3,602.64	\$ 5,052.06
UHC Alliance HMO 10	\$ 957.78	\$ 1,874.76	\$ 2,625.48
UHC Alliance HMO 20/30	\$ 898.62	\$ 1,755.42	\$ 2,458.20
UHC Alliance Journey - SCGA Only	\$ 769.08	\$ 1,493.28	\$ 2,096.10
Harmony 10	\$ 801.72	\$ 1,575.90	\$ 2,211.36
Harmony 15	\$ 792.54	\$ 1,559.58	\$ 2,187.90
SIMNSA	\$ 283.56	\$ 496.74	\$ 729.30

Dental & Vision			
Vision "VSP"	\$ 7.14	\$ 15.30	\$ 23.46
Delta Dental PPO	\$ 41.11	\$ 82.50	\$ 138.93
United Concordia Dental HMO	\$ 20.08	\$ 36.68	\$ 58.00